

TRANSCRIPT PREPARED BY THE CLERK OF THE LEGISLATURE
Transcriber's Office

February 19, 1999 LB 226, 813

to 813. All those in favor vote aye; all those opposed vote nay. Members, please vote if you care to. Record.

CLERK: 27 ayes, 0 nays, Mr. President, on adoption of Senator Bohlke's amendment.

SPEAKER KRISTENSEN: The amendment is adopted.

CLERK: I have nothing further on the bill, Mr. President.

SPEAKER KRISTENSEN: Debate on advancement of the bill? Senator Bohlke, you're recognized to close on the advancement of LB 813. She waives closing on the advancement. The question before the body is the advancement of LB 813 to E & R Initial. All those in favor vote aye; all those opposed vote nay. Record.

CLERK: 26 ayes, 0 nays, Mr. President, on the advancement of 813.

SPEAKER KRISTENSEN: LB 813 advances. LB 226.

CLERK: (LB) 226, Mr. President, by Senator Hilgert. (Read title.) Bill was introduced on January 11, referred to the Health Committee, advanced to General File. I have committee amendments pending, Mr. President.

SPEAKER KRISTENSEN: Senator Hilgert, you're recognized to open on LB 226.

SENATOR HILGERT: Thank you, Mr. President and members. This bill, although relevant today, based on the headlines of some instance...of an instance that happened in the state of Nebraska, was drafted some time ago before that even took place. This is not a reaction to any specific instance. Let me first (sic) by saying that. And I'm going to speak towards the committee amendment somewhat because the original bill does differ somewhat from the committee amendments. The bill is intended to, basically, remove any barriers that exist, are perceived to exist, from the proper pain management to patients. In the findings, usually...at some times I, even myself, have seen some of the legislative findings as almost dicta, if you will, at times. But the findings, and if you do look on the